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JUN 23 2004

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June 23, 2004

TO: Examiner Woitach (TC1600)

GROUP: 1632

FAX NUMBER: 703-872-9307

ATTORNEY DOCKET NO.: DEX-0054

SERIAL NO.: 09/426,548

FILED: October 22, 1999

NUMBER OF PAGES:

MESSAGE: Attached please find Amendment Transmittal Letter; Reply to the Office Action mailed March 23, 2004; and Certificate of Transmission by Facsimile.

Kathleen A. Tyrrell, Registration No. 38,350

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Applicant(s): Robbins et al.

Docket No.

DEX-0054

Application No.

09/426,548

Filing Date

October 22, 1999

Examiner

Woitach, Joseph T.

Group Art Unit

1632

Invention: Novel Mutation in Human MLH1 and Human MSH2 Genes Useful in Diagnosing Colorectal Cancer

I hereby certify that this _____ **Reply under 37 CFR 1.111**

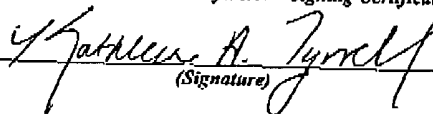
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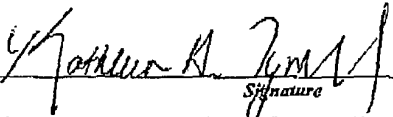
(Date)

Kathleen A. Tyrrell

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(Signature)

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No.	
Applicant(s): Robbins et al.				DEX-0054	
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
09/426,548	October 22, 1999	Woitach, Joseph T.		1632	
Invention: Novel Mutation in Human MLH1 and Human MSH2 Genes Useful in Diagnosing Colorectal Cancer					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	3 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____					
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1619					
<input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature Kathleen A. Tyrrell, Reg. No. 38,350			Dated: June 23, 2004		
Licata & Tyrrell P.C. 66 East Main Street Marlton, New Jersey 08053 Tel : 856-810-1515 Fax: 856-810-1454			<div>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div>Signature of Person Mailing Correspondence</div> <div>Typed or Printed Name of Person Mailing Correspondence</div>		
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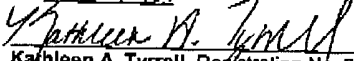
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: DEX-0054
Inventors: Robbins et al.
Serial No.: 09/426,548
Filing Date: October 22, 1999
Examiner: Weitach, Joseph T.
Group Art Unit: 1632
Title: Novel Mutations in Human MLH1 and
Human MSH2 Genes Useful in
Diagnosing Colorectal Cancer

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transmitted to the Patent and Trademark Office on
the date shown below.

On June 23, 2004


Kathleen A. Tyrrell, Registration No. 38,350

Assistant Commissioner for Patents
Washington, DC 20231

Dear Sir:

Reply under 37 C.F.R. 1.111

This is a reply to the Office Action mailed March 23,
2004 setting a three (3) month statutory period for
response. Please enter the following remarks and amendments
into the record.

Amendments to the claims are reflected in the listing
of claims which begins on page 2 of this paper.

Remarks begin on page 4.